



UNDOING RACISM™ WORKSHOP
July 11-13, 2012 – Nashua NH

Registration

Registration DEADLINE: Friday, June 29, 2012

(Please complete one registration form per participant)

Name _____ Organization _____

Address _____

Phone _____ Email _____

What is your interest in participating in this undoing racism workshop? What do you expect to gain?
(Check all that apply)

Develop a common definition of racism ()

Understand my connection to racism ()

Develop awareness & understanding about ways to begin Undoing Racism ()

Gain knowledge about how to be more effective in my work ()

Other Interest

Please check appropriate rate:

() Corporation/Government/Institutional rate \$300

() Non-profit/CDC \$250

() Individual rate \$150

Please make checks payable to: **NH Black Women Health Project**

Mail check and a copy of completed form to:

NHBWHP
200 Elm Street #14
Manchester NH 03101

() Yes, I have special physical needs _____

() Yes, I have special dietary needs _____